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APPLICANTS

Todd Michael Burdine, Wappingers Falls, NY;

Donato Orazio Fortenza, Hopewell Junction, NY;

Orazio Pasquale Fortenza, Hopewell Junction, NY; William James Hurley, Poughkeepsie, NY;

Steven Michnowski, Wappingers Falls, NY;

James Bernard Webb, Wallkill, NY;

C6
** CONTINUING DATA *****C6
** FOREIGN APPLICATIONS *****C6
IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

ADDRESS

30206
 IBM CORPORATION
 ROCHESTER IP LAW DEPT. 917
 3605 HIGHWAY 52 NORTH
 ROCHESTER , MN
 55901-7829

TITLE

ABIST-assisted detection of scan chain defects

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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